PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2003

10729491

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
_						mn 2)	TYPE			OR	SMALL	ENTITY	
TOTAL CLAIMS			12			j.	• [RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			12 minus 20= *					X\$ 9=		OR	X\$18=		
INE	DEPENDENT C	LAIMS	/ mi	nus 3 =	*			X43=		OR	X86=		
ΜL	JLTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If the difference in column 1 is less than zero, e					"0" in c	column 2	L	TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II											OTHER		
-		(Column 1)		(Colun	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	<u> </u>	=		X43=		OR	X86=	• ,	
	FIRST PRESE	NTATION OF MI	JUI IPLE DEF	PENDENT	CLAIM			+145=		OR	+290=		
								TOTAL			TOTAL		
		Αl	ODIT. FEE		OR ,	ADDIT. FEE							
	T	(Column 1) CLAIMS	T	(Colun		(Column 3)	_						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=		
							L	TOTAL			TOTAL		
								DIT. FEE		• • •	ADDIT. FEE		
-	`	(Column 1) CLAIMS		(Colum		(Column 3)	_		-				
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** -		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	┢	X43=			X86=		
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A-0=		OR	∧00=	-	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL ADDIT. FEE		
		ber Previously Paid					found	I in the ann	ropriate box	in coli	umn 1.		